


ORIGINAL

FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted C/O FEC 999 E Street N.W.		2. Federal Grant or Other Identifying Number Assigned By Federal Agency CDFA 39.011 - Sec 102		OMB Approval No. 0348-0038	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) Oregon Secretary of State 255 Capitol Street NE, Ste 180, Salem OR 97310					
4. Employer Identification Number 93-6001784		5. Recipient Account Number or Identifying Number 1650000401		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 5/1/2003		To: (Month, Day, Year)		9. Period Covered by this Report From: (Month, Day, Year) 1/1/2005 To: (Month, Day, Year) 12/31/2005	
10. Transactions:		I Previously Reported	II This Period	III Cumulative	
a. Total outlays		1,686,406.00	25,000.00	1,711,406.00	
b. Recipient share of outlays		0.00	0.00	0.00	
c. Federal share of outlays		1,686,406.00	25,000.00	1,711,406.00	
d. Total unliquidated obligations				0.00	
e. Recipient share of unliquidated obligations				0.00	
f. Federal share of unliquidated obligations				0.00	
g. Total Federal share(Sum of lines c and f)				1,711,406.00	
h. Total Federal funds authorized for this funding period				1,822,758.00	
i. Unobligated balance of Federal funds(Line h minus line g)				111,352.00	
11. Indirect Expense	a. Type of Rate(Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
	b. Rate N/A	c. Base N/A	d. Total Amount	e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. Public Law 107-252 Section 102 - Replacement of Punch Card or Lever Voting Machines.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title Bill Bradbury, Secretary of State			Telephone (Area code, number and extension) 503.986.2238		
Signature of Authorized Certifying Official 			Date Report Submitted February 27, 2006		

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2.) Consolidated Report on HAVA (January 1, 2005 – December 31, 2005)
Title I, Section 102 - Punchcard & Lever Voting System Replacement

HAVA, under Section 102 requires States to use the funding (either directly or as a reimbursement for costs incurred on or after January 1, 2001) to replace punchcard and/or lever voting systems in precincts within that State that used such systems in the November 2000 election qualifying precincts. As per Oregon's certification of Section 102, Oregon has 571 total qualifying precincts, consisting of 571 punchcard precincts and 0 lever voter system precincts. Additional requirements include:

- Systems must be replaced in time for the regularly scheduled general election for Federal office to be held in November 2004 (unless a waiver is obtained under Section 102(a)(3)(B).
- Certifications that the State will continue to comply with current voting laws stated in Section 906; and
- Certifications that the replacement voting systems will meet the requirements of Title III, Section 301.

RESPONSE:

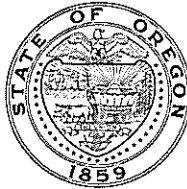
In 2005, there was only one transaction that took place related to Section 102. In May 2005, Lane County submitted their final invoice for reimbursement of \$25,000.

Currently, there is a balance of \$111,352.00 in the fund with \$104,390.21 to be directed to Washington County upon completion of their installation. All remaining funds, which will be approximately \$7,000, will be addressed later this year by the HAVA Steering Committee and the seven qualifying counties.

Total Punchcard Replacement Funding/Allocation: \$1,822,758
Current Balance: \$111,352.00

OFFICE OF THE SECRETARY OF STATE

BILL BRADBURY
SECRETARY OF STATE



ELECTIONS DIVISION

JOHN LINDBACK
DIRECTOR

141 STATE CAPITOL
SALEM, OREGON 97310-0722

ELECTIONS — (503) 986-1518

February 27, 2006

ORIGINAL

U.S. Election Assistance Commission
Attn: Peggy Sims
1225 New York Ave. NW – Suite 1100
Washington, D.C. 20005

Dear Ms. Sims:

The enclosed hard-copy submissions of the consolidated reports on HAVA Title 1, Section 101 and HAVA Title 1, Section 102 serve as follow-up to the electronic and fax copies submitted on February 27, 2006.

Should you have any questions, do not hesitate to contact me directly.

Thanks for your time and consideration.

Sincerely,

Frank Garcia, Jr.
Manager, Help America Vote Act

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Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0038), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Please type or print legibly. The following general instructions explain how to use the form itself. You may need additional information to complete certain items correctly, or to decide whether a specific item is applicable to this award. Usually, such information will be found in the Federal agency's grant regulations or in the terms and conditions of the award. You may also contact the Federal agency directly.

Item	Entry	Item	Entry
1, 2 and 3.	Self-explanatory.		
4.	Enter the Employer Identification Number (EIN) assigned by the U.S. Internal Revenue Service.		the value of in-kind contributions applied, and the net increase or decrease in the amounts owed by the recipient for goods and other property received, for services performed by employees, contractors, subgrantees and other payees, and other amounts becoming owed under programs for which no current services or performances are required, such as annuities, insurance claims, and other benefit payments.
5.	Space reserved for an account number or other identifying number assigned by the recipient.	10b.	Self-explanatory.
6.	Check <i>yes</i> only if this is the last report for the period shown in item 8.	10c.	Self-explanatory.
7.	Self-explanatory.	10d.	Enter the total amount of unliquidated obligations, including unliquidated obligations to subgrantees and contractors. Unliquidated obligations on a cash basis are obligations incurred, but not yet paid. On an accrual basis, they are obligations incurred, but for which an outlay has not yet been recorded. Do not include any amounts on line 10d that have been included on lines 10a, b, or c. On the final report, line 10d must be zero.
8.	Unless you have received other instructions from the awarding agency, enter the beginning and ending dates of the current funding period. If this is a multi-year program, the Federal agency might require cumulative reporting through consecutive funding periods. In that case, enter the beginning and ending dates of the grant period, and in the rest of these instructions, substitute the term "grant period" for "funding period."	10e.	f, g, h, h and i. Self-explanatory.
9.	Self-explanatory.	11a.	Self-explanatory.
10.	The purpose of columns I, II, and III is to show the effect of this reporting period's transactions on cumulative financial status. The amounts entered in column I will normally be the same as those in column III of the previous report in <i>the same funding period</i> . If this is the first or only report of the funding period, leave columns I and II blank. If you need to adjust amounts entered on previous reports, footnote the column I entry on this report and attach an explanation.	11b.	Enter the indirect cost rate in effect during the reporting period.
10a.	Enter total program outlays less any rebates, refunds, or other credits. For reports prepared on a cash basis, outlays are the sum of actual cash disbursements for direct costs for goods and services, the amount of indirect expense charged, the value of in-kind contributions applied, and the amount of cash advances and payments made to subrecipients. For reports prepared on an accrual basis, outlays are the sum of actual cash disbursements for direct charges for goods and services, the amount of indirect expense incurred,	11c.	Enter the amount of the base against which the rate was applied.
		11d.	Enter the total amount of indirect costs charged during the report period.
		11e.	Enter the Federal share of the amount in 11d.
		Note:	If more than one rate was in effect during the period shown in item 8, attach a schedule showing the bases against which the different rates were applied, the respective rates, the calendar periods they were in effect, amounts of indirect expense charged to the project, and the Federal share of indirect expense charged to the project to date.